

JAN 24 2005

Docket Number (Optional)

3586.04-1

Application Number 09/870,027

Filed 05/29/2001

For **QUINOLINE-AMINO ACID (C=O)-(MULTIPLE AMINO ACIDS)-LEAVING GROUP COMPOUNDS...**

Art Unit 1653

Examiner **Lukton, David**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | <u>Fee</u> | <u>Small Entity Fee</u> | |
|--|------------|-------------------------|---------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110 | \$55 | \$ <u>0</u> |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$430 | \$215 | \$ <u>450</u> |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$980 | \$490 | \$ <u>0</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1530 | \$765 | \$ <u>0</u> |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2080 | \$1040 | \$ <u>0</u> |

| | | |
|-------------------------------------|---|---|
| <input type="checkbox"/> | Applicant claims small entity status. See 37 CFR 1.27. | 01/27/2005 HMARZ11 00000001 09870027 |
| <input checked="" type="checkbox"/> | A check in the amount of the fee is enclosed. | 01 FC:2252 450.00 OP |
| <input type="checkbox"/> | Payment by credit card. Form PTO-2038 is attached. | Void date: 01/27/2005 HMARZ11 00000001 09870027 |
| | | 01 FC:2252 -450.00 OP |
| <input type="checkbox"/> | The Director has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 16-1331. I have enclosed a duplicate copy of this sheet. | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor 01 FC:1252 450.00 OP

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 29,202

☐ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR

Forwarded to

Signature

Howard M. Peters

Typed or printed name

1/18/2005

Date _____

(650) 324-1677

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.